

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Phil Pavlov for Congress

ADDRESS (number and street)

4126 Yankee Road

Check if different  
than previously  
reported. (ACC)

St. Clair

MI

48079

2. FEC IDENTIFICATION NUMBER ▼

C

C00574616

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

MI

10

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2015

through

M M / D D / Y Y Y Y

03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Deborah Anne Johnson

Signature of Treasurer

Deborah Anne Johnson

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Phil Pavlov for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	58230.00	58230.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	58230.00	58230.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2195.02	2195.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	2195.02	2195.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	56534.98	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	5490.30	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 20

Write or Type Committee Name

Phil Pavlov for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:**

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

56500.00

56500.00

(ii) Unitemized.....

1730.00

1730.00

(iii) TOTAL of contributions from individuals ▶

58230.00

58230.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

58230.00

58230.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

500.00

500.00

**16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

58730.00

58730.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 20

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2195.02	2195.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	2195.02	2195.02

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	58730.00
25. SUBTOTAL (add Line 23 and Line 24).....	58730.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2195.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	56534.98

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 20

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Phil Pavlov for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Milus Allison</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2015	
Mailing Address 1993 Kennedy Road			<b>Transaction ID : SA11AI.4155</b>	
City	State	Zip Code	Amount of Each Receipt this Period 2000.00	
St. Clair	MI	48079	Contribution	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2000.00		
Name of Employer BTM Corp		Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Laura D Appel</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2015	
Mailing Address 224 Vicksburg Drive			<b>Transaction ID : SA11AI.4149</b>	
City	State	Zip Code	Amount of Each Receipt this Period 250.00	
Lansing	MI	48917-9607	Contribution	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 250.00		
Name of Employer Michigan Hospital Association		Occupation Senior Vice President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mark Besette</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2015	
Mailing Address 4655 Desmond Beach			<b>Transaction ID : SA11AI.4176</b>	
City	State	Zip Code	Amount of Each Receipt this Period 2000.00	
Burtchville	MI	48059	Contribution	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2000.00		
Name of Employer Domtar Paper		Occupation Executive		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4250.00
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Phil Pavlov for Congress

Full Name (Last, First, Middle Initial)

Tracee Blake

Mailing Address 314 S. Ninth St

City

St. Clair

State

MI

Zip Code

48079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Port Huron Area Schools

Occupation

Administrator

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2015

Transaction ID : SA11AI.4112

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

Jeff Bohm

Mailing Address 3453 St. Clair Shores Blvd

City

East China

State

MI

Zip Code

48054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Viking Fitness

Occupation

Owner

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2015

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

Robert Clancy

Mailing Address 52823 Base Street

City

New Baltimore

State

MI

Zip Code

48047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Robert Clancy Contracting

Occupation

Owner

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.4204

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

4950.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Phil Pavlov for Congress

Full Name (Last, First, Middle Initial)

Gail Clarkson

A.

Mailing Address 1539 Lochridge

City

Bloomfield Hills

State

MI

Zip Code

48302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MediLodge

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

Donald J Cooper II

B.

Mailing Address 1750 Whitegate Lane

City

East Lansing

State

MI

Zip Code

48823

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Heritage Academies

Occupation

Government Affairs Representative

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2015

Transaction ID : SA11AI.4131

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

Bruce Crisman

C.

Mailing Address 1285 S. Lakeshore Road

City

Harbor Beach

State

MI

Zip Code

48441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

B.W. Crisman Company

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2015

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 20

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Phil Pavlov for Congress**

Full Name (Last, First, Middle Initial)

**Jay DeBoyer**

Mailing Address 8860 Stone Road

City

Clay

State

MI

Zip Code

48001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Clair County

Occupation

County Clerk

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2015

Transaction ID : SA11AI.4139

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**William Drake**

Mailing Address 6789 River Road

City

Marine City

State

MI

Zip Code

48039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Pharmacist

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2015

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

**David Finkbeiner**

Mailing Address 85 Damon Road

City

Haslett

State

MI

Zip Code

48840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Michigan Hospital Association

Occupation

Senior Vice President Advocacy

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5450.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Phil Pavlov for Congress

Full Name (Last, First, Middle Initial)

A. Gary Fletcher

Mailing Address 4266 Gratiot Ave

City

Port Huron

State

MI

Zip Code

48060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fletcher, Fealko

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mary Fletcher

Mailing Address 4266 Gratiot Ave

City

Port Huron

State

MI

Zip Code

48060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11AI.4106

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

C. John Foster

Mailing Address 1521 Preservation Lane

City

St. Clair

State

MI

Zip Code

48079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Foster Oil

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period

2500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7900.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Phil Pavlov for Congress**

Full Name (Last, First, Middle Initial)

**Michael Gilleran**

Mailing Address 3279 McKinley Road

City

East China

State

MI

Zip Code

48054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McCausey Lumber

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 31 2015

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

**Michael Haddon**

Mailing Address 2055 N. River Road

City

St. Clair

State

MI

Zip Code

48079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Greater Detroit Auto Auction

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 30 2015

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

**J.C. Huizenga**

Mailing Address 3755 36th Street, S.E.  
Suite 100

City

Grand Rapids

State

MI

Zip Code

49512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Heritage Academies

Occupation

Executive

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 26 2015

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period

2700.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Phil Pavlov for Congress

Full Name (Last, First, Middle Initial)

Jeanette Hunt

A.

Mailing Address 3404 Learman Road

City

Bad Axe

State

MI

Zip Code

48413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Homemaker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2015

Transaction ID : SA11AI.4200

Amount of Each Receipt this Period

2300.00

Contribution

Full Name (Last, First, Middle Initial)

John M Hunt

B.

Mailing Address 3404 Learman Road

City

Bad Axe

State

MI

Zip Code

48413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J.W. Hunt TruckingOccupation  
Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2015

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

William Jackson

C.

Mailing Address 5263 E. Hidden Lake

City

East Lansing

State

MI

Zip Code

48823

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michigan Hospital AssociationOccupation  
Senior Vice President/CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2015

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

5250.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Phil Pavlov for Congress

Full Name (Last, First, Middle Initial)

Robert Joachim

Mailing Address 668 N. Riverside Ave

City

St. Clair

State

MI

Zip Code

48079

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advance TechniSalesOccupation  
Director

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : SA11AI.4198

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

Larry W Kinney

Mailing Address 9116 Moonlight Bay

City

Pinckney

State

MI

Zip Code

48169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DataPakOccupation  
Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2015

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

Craig Lawrence

Mailing Address 5570 Lakeshore Road

City

Fort Gratiot

State

MI

Zip Code

48059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
By-Lo OilOccupation  
Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2015

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3950.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 20  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Phil Pavlov for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nancy McKeague</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 627 N. Harrison Avenue		Transaction ID : SA11AI.4157
City East Lansing	State MI	
Zip Code 48823		Amount of Each Receipt this Period Contribution 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Michigan Hospital Association	Occupation Senior Vice President	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Richard McLellan</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2015
Mailing Address 1246 Windgate Drive		Transaction ID : SA11AI.4165
City East Lansing	State MI	
Zip Code 48823-2233		Amount of Each Receipt this Period Contribution 2000.00
FEC ID number of contributing federal political committee. C		
Name of Employer McLellan Law Offices	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Christopher J Mitchell</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2015
Mailing Address 1262 Lakeside Drive		Transaction ID : SA11AI.4119
City East Lansing	State MI	
Zip Code 48823-2427		Amount of Each Receipt this Period Contribution 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Michigan Hospital Association	Occupation Vice President of Government Affairs	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Phil Pavlov for Congress

Full Name (Last, First, Middle Initial)

John Monaghan

A.

Mailing Address 503 Edison Blvd

City

Port Huron

State

MI

Zip Code

48060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Clair County

Occupation

Judge

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2015

Transaction ID : SA11AI.4184

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

Eugene D Oldford

B.

Mailing Address 1935 North River Road

City

St. Clair

State

MI

Zip Code

48079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Oldford and Associates

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2015

Transaction ID : SA11AI.4133

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

William Oldford

C.

Mailing Address 850 Birkdale

City

St. Clair

State

MI

Zip Code

48079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Talmer Bank

Occupation

Vice President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Phil Pavlov for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Nicholas J Paradiso III</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2015	
Mailing Address 1755 Secretariat Drive S.E.			<b>Transaction ID : SA11AI.4159</b>	
City	State	Zip Code	Amount of Each Receipt this Period 1000.00	
Grand Rapids	MI	49546-8211	Contribution	
FEC ID number of contributing federal political committee.		C		
Name of Employer National Heritage Academy		Occupation Executive		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Brian Peters</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2015	
Mailing Address 3051 Crofton Drive			<b>Transaction ID : SA11AI.4115</b>	
City	State	Zip Code	Amount of Each Receipt this Period 250.00	
DeWitt	MI	48820-7770	Contribution	
FEC ID number of contributing federal political committee.		C		
Name of Employer Michigan Hospital Association		Occupation Executive Vice President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Pscholka Results PAC</b>			Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2015	
Mailing Address 5810 Longhorn Trail			<b>Transaction ID : SA11AI.4161</b>	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
Stevensville	MI	49127	Contribution	
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1750.00	
<b>TOTAL</b> This Period (last page this line number only).....				

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Phil Pavlov for Congress

Full Name (Last, First, Middle Initial)

Fred Rollins

A.

Mailing Address 55 Touraine Road

City

Grosse Pointe Farms

State

MI

Zip Code

48236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Otsiketa Capital

Occupation

Executive

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2015

Transaction ID : SA11AI.4214

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

David Rushing

B.

Mailing Address 12618 Masters Road

City

Memphis

State

MI

Zip Code

48041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Clair County

Occupation

County Commissioner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2015

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

David Seaman

C.

Mailing Address 805 Ledge Moore Blvd

City

Grand Ledge

State

MI

Zip Code

48837-2037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Michigan Hospital Association

Occupation

Executive Vice President Advocacy

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3200.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Phil Pavlov for Congress

Full Name (Last, First, Middle Initial)

A. Dana Thomas

Mailing Address 9116 Moonlight Bay

City

Pinckney

State

MI

Zip Code

48169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Homemaker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2015

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

2700.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dennis Wend

Mailing Address 1315 S. Water

City

Marine City

State

MI

Zip Code

48039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wend and AssociatesOccupation  
Executive

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Transaction ID : SA11AI.4101

Amount of Each Receipt this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Frank Wronski

Mailing Address 5139 Lockridge

City

Bloomfield Hills

State

MI

Zip Code

48302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MediLodgeOccupation  
Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2015

Transaction ID : SA11AI.4188

Amount of Each Receipt this Period

2700.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7400.00

56500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 ☒ 15

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NAME OF COMMITTEE (In Full)

**Phil Pavlov for Congress**

Full Name (Last, First, Middle Initial)

**Huntington Bank**

**A.**

Mailing Address 205 S. Range Road

City

Marysville

State

MI

Zip Code

48040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 30 2015

**Transaction ID : SA15.4229**

Amount of Each Receipt this Period

500.00

Interest Income

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

500.00

500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 20

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Phil Pavlov for Congress**

Full Name (Last, First, Middle Initial)

**A. Macomb County Republican Party**

Mailing Address P.O. Box 380962

City	State	Zip Code
Clinton Township	MI	48038

Purpose of Disbursement  
Lincoln Day Dinner Ad and Tickets

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2015

Amount of Each Disbursement this Period

700.00
--------

Transaction ID : SB17.4220

**B. Sawicki Signs**

Mailing Address 1521 W. Lafayette

City	State	Zip Code
Detroit	MI	48216

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2015

Amount of Each Disbursement this Period

600.00
--------

Transaction ID : SB17.4226

**c. Stripe**Mailing Address 3180 18th Street  
Suite 100

City	State	Zip Code
San Francisco	CA	94110

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2015

Amount of Each Disbursement this Period

469.73
--------

Transaction ID : SB17.4232

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1769.73

1769.73

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 20 OF 20

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Phil Pavlov for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Dykema Gossett**

Nature of Debt (Purpose):

Legal Fees

Mailing Address 201 Townsend Street

City State

Zip Code

Lansing

MI

48933

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4249

Amount Incurred This Period

1690.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

1690.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Resch Strategies**

Nature of Debt (Purpose):

Consulting

Mailing Address 230 N. Washington Square  
Suite 230

City State

Zip Code

Lansing

MI

48933

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4248

Amount Incurred This Period

3799.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

3799.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

5490.30

2) **TOTALS** This Period (last page this line number only) ..... ▶

5490.30

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

5490.30